

**Local Government Ethics Law
 Financial Disclosure Statement**

**Year of Service:
 2015**

*This Financial Disclosure Statement is required annually of all local government officers
 in accordance with N.J.S. 40A:9-22.1 et seq., the Local Government Ethics Law.*

Section I. Personal Information - Local Government Officer

First Name: Latrenee Middle: Last Name: Richardson Suffix:
 Home Address: 301 North Wade Blvd Telephone Numbers: Home: (856)575-2604
 Millville NJ, 08332 Business:
 Spouse (includes Civil Union partner).

| Entity | Agency/Board | Position Held | Term Expires * |
|---|--------------------|-----------------------------------|----------------|
| 1 Fairfield Township - County of Cumberland | Fairfield Township | Planning & Zoning Board Secretary | 12/31/2015 |

* = if applicable

Section II. Financial Information

Provide the following information for yourself and *members of your immediate family* for the prior calendar year. If none, please indicate NONE in the space provided.

A. List the name and address of each source of income, earned and unearned, which you received in excess of \$2,000. If a publicly traded security is the source of income, the security need not be reported unless you or a member of your immediate family has an interest in the business organization.

| Name | Address | Self/Spouse | Dependent Name |
|--------|---------|-------------|----------------|
| 1 None | | | |

B. List the name and address of each source of fees and honorariums having an aggregate amount exceeding \$250 received from any single source for personal appearances, speeches, or writing.

| Name | Address | Self/Spouse | Dependent Name |
|--------|---------|-------------|----------------|
| 1 None | | | |

C. List the name and address of each source of gifts, reimbursements or prepaid expenses having an aggregate value exceeding \$400 from any single source,

| Name | Address | Self/Spouse | Dependent Name |
|--------|---------|-------------|----------------|
| 1 None | | | |

D. List the name and address of all business organizations in which an interest was held.

| Name | Address | Self/Spouse | Dependent Name |
|--------|---------|-------------|----------------|
| 1 None | | | |

E. List the address and a brief description of all real property in the State of New Jersey in which an interest was held.

| Municipality/County | Block | Lot | Qual. | Address | % Own * | Self/Spouse | Dependent Name |
|---------------------|-------|-----|-------|---------|---------|-------------|----------------|
| 1 None | | | | | | | |

* = % of Ownership

F. Optional Comments:

Section III. Certification & online filing process

I hereby certify that this Financial Disclosure Statement contains no willful misstatement of fact or omission of material fact and, constitutes a full disclosure with respect to all matters required by N.J.S.A. 40A:9-22.1 et seq., to the best of my knowledge. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to fines and possible disciplinary action.

Date: 05/01/2015

Name: Latrenee Richardson

I further certify that I intend my electronic signature on this statement to be the legally binding equivalent of my traditional handwritten signature.